| | | Application or Docket Number | | | | | | | | | | |
|--|----------------------|---|-----------------------|-------------------------------|---------------------------------------|------------------|---------------|--------|------------------------|---------|-------------|------------------------|
| PATENT APPLICATION FEE DETERMINATION RECORD | | | | | | | | | | | | |
| Effective January 1, 2003 | | | | | | | | | | | | |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | L EN | | OR | OTHER | |
| TOTAL CLAIMS | | | 12 | | | | RAT | E | FEE | | RATE | FEE |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | BASIC | FEE | 375.00 | OR | BASIĆ FEE | 750.00 |
| TOTAL CHARGEABLE CLAIMS | | | Cminus 20= | | • | | X\$ 9 |)= | | OR | X\$18= · | |
| INDEPENDENT CLAIMS | | | 9 minus 3 = | | *6 | | X42= | | | OR | X84= ' | 804 |
| MUI | LTIPLE-DEPEN | DENT CLAIM PF | RESENT | | | | +140= | | | OR | +280= | 2-1- |
| * If | the difference i | in column 1 is l | ess than ze | ro, enter | "0" in c | "0" in column 2 | | | | OR | TOTAL | 1184 |
| 1. , CLAIMS AS AMENDED - PART II | | | | | | | | AL | | 10,, | OTHER | THAN |
| 9/ | HM) | | (Colur | • | (Column 3) SMA | | | ENTITY | OR | SMALL | | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | RAT | E. | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | + 10 | Minus | ** | 20 | = | X\$ 9 |)= | / | OR | X\$18= | 1 |
| MEN | Independent | . 9 | Minus | *** | <u>ğ</u> | = / | X42 | = | -/- | OR | X84= | 1 |
| lacksquare | FIRST PRESE | JLTIPLE DEP | TIPLE DEPENDENT CLAIM | | | - | | -/ | | 000 | | |
| | | • | | | • | | +140 | | 4 | OR | +280= | |
| | | • | | . • | | | ADDIT. | FEE | Ц | OR | ADDIT. FEE | |
| _ | | (Column 1) CLAIMS | | | mn 2) HEST | (Column 3) | | | | | | |
| AMENDMENT B | | REMAINING AFTER AMENDMENT | | NUM PREVI | BER OUSLY FOR | PRESENT EXTRA | RAT | E | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | 5 | X\$ 9 | 9≈ | | OR | X\$18= | |
| | Independent | * | Minus | *** | | = | X42 | = | | OR | X84= | |
| | FIRST PRESE | JLTIPLE DEP | PLE DEPENDENT CLAIM | | | +14 | าะ | | OR | +280= | | |
| | • | | | | | | LTO | TAL | | OR | TOTAL | |
| | | (0-1 | | (0 -1) | 0\ | (O - l | ADDIT. | FEE | | ION | ADDIT. FEE | L |
| | | (Column 1) CLAIMS | | HIGH | mn 2) HEST | (Column 3) | | | ADDI- | | | ADDI- |
| AMENDMENT C | | REMAINING AFTER AMENDMENT | | PREVI | MBER OUSLY FOR | PRESENT EXTRA | RAT | E | TIONAL FEE | | RATE | TIONAL FEE |
| NOW N | Total | * | Minus | ** | | = | X\$ 9 |)= | | OR | X\$18= | |
| WE WE | Independent | * | Minus | *** | · · · · · · · · · · · · · · · · · · · | - | X42 | = | | OR | X84= | |
| | FIRST PRESE | NTATION OF M | ULTIPLE DEI | PENDEN | T CLAIM | | | | | ١. | | |
| | If the entry in colu | mn 1 is less than t | ne entry in coli | · IMn 2. writ | te "O" in co | olumn 3 | +140 | | <u> </u> | OR | +280= | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." | | | | | | | | | | | | |
| } | | nber Previously Pa | | | | | er found in t | пе ар | propriate bo | x in co | 1. nmuk | |